

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	MX	7551	2/2
O.I.P.E. CLASSIFIER	1	1/	0/6
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW			
	59573		3-21-01

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral).... Canceled A ..... Appeal  
 ÷ ..... Restricted O ..... Objected

Claim	Final	Original	Date
1	✓	✓	1/20/01
2	✓	✓	
3	✓	✓	
4	✓	✓	
5	✓	✓	
6	✓	✓	
7	✓	✓	
8	✓	✓	
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If more than 150 claims or 10 actions  
staple additional sheet here

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